

SCHEDULE AF: Affordable Housing Rental Income

Property Location:	Affordable Units: ____ Market Units: ____ Total Units: ____	Year Built:
Parcel ID:	Submitted By:	Date:

Affordable Housing Rental Income - Actuals

AMI Type	Studio Units	Monthly Rent	1 Bedroom Units	Monthly Rent	2 Bedroom Units	Monthly Rent	3 Bedroom Units	Monthly Rent	4 Bedroom Units	Monthly Rent
30%										
50%										
60%										
80%										
110%										
Market										
Other AMI %										
(Plus Sect 8 /MRVP Subsidy)										
(Less Utility Allowances)										

Other Income

Parking:		Laundry:		Other Income:		Specify Source:	
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Property Financing			Operating Expenses			
Total Development Cost:	Land:		Vacancy & Collection Loss:		Janitorial Service:	
	Building:		Management Fees/Admin:		Resident Services:	
1 st Mortgage Amount (Rate/Term):			Utilities (Landlord):		Professional & Legal Fees:	
Debt Coverage Ratio:			Repairs & Maintenance:		Advertising, Telephone, Supplies:	
Subordinate Mortgage(s) Grants (i.e. DHCD):			Insurance:		DHCD Monitoring:	
Equity incl. Tax Credit Equity:			Reserves for Replacement:		Other:	

ANNUAL INCOME AND EXPENSE SUMMARY REPORT

Parcel ID:		Calendar Year: 2021	
Property Address:		Mailing Address:	
Owner:		City/State/Zip:	
1. Primary Property Use: Apartment___ Office:___ Retail___ Industrial___ Mixed Use___ Other___			
2. Gross Building Area (Sq. feet)		6. Number of Units	
3. Net Leasable Area (Sq. feet)		7. Number of Parking Spaces	
4. Owner Occupied Area (Sq. feet)		8. Actual Year Built	
5. Common Area (Sq. feet)		9. Year Remodeled	

ANNUAL INCOME		ANNUAL EXPENSES	
10. Apartment Rentals (Sched. A)	\$	22. Advertising	\$
11. Office Rentals (Sched. B)	\$	23. Cleaning and Maintenance (Includes Snow Removal and Trash Removal)	\$
12. Retail Rentals (Sched. B)	\$	24. Commissions/Leasing Fees	\$
13. Industrial Rentals (Sched. B)	\$	25. Insurance (Building Only)	\$
14. Mixed Use Rentals (Sched. C)	\$	26. Professional & Legal Fees	\$
15. Other Rentals	\$	27. Management/Admin Fees	\$
16. Parking Rentals	\$	28. Repairs and Maintenance	\$
17. Common Area Maint. (CAM)	\$	29. Supplies	\$
18. Other Property Income (billboard, cell tower, etc.)	\$	30. Utilities (paid by owner)	\$
19. Total Potential Gross Income	\$	31. Other	\$
20. Vacancy and Collection Loss	\$	32. Reserves for Replacement	\$
21. Effective Gross Annual Income (Subtract Line 20 from Line 19)	\$	33. Total Expenses Add lines 22 to 33	\$

I certify under the pains and penalties of perjury that the information supplied herewith is true and correct

Submitted by: _____ Title: _____ Phone: _____

Signature: _____ Date: _____

The above identified property is owner occupied _____

The above identified property is leased to a related person, corporation, or business entity _____